

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS4225HHA	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/16/2009
NAME OF PROVIDER OR SUPPLIER CORINTHIANS OF NEVADA HEALTH CARE INC		STREET ADDRESS, CITY, STATE, ZIP CODE 2001 S RAINBOW BLVD STE K LAS VEGAS, NV 89146		
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H 00	<p>INITIAL COMMENTS</p> <p>This Statement of Deficiencies was generated as a result of a State Licensure survey and complaint investigation conducted at your facility on June 16, 2009 in accordance with Nevada Administrative Code, Chapter 449, Home Health Agencies.</p> <p>Ten clinical records were reviewed.</p> <p>Complaint #21877 was investigated and remains under review.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>The following deficiencies were identified:</p>	H 00		
H151 SS=D	<p>449.782 Personnel Policies</p> <p>A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for:</p> <p>5. Job descriptions for each category of personnel which are specific and include the type of activity each may carry out;</p> <p>This Regulation is not met as evidenced by: Based on employee file review, document review and interview with the Administrator, the agency failed to have signed job descriptions for each category of personnel for 3 of 18 employees (#4,</p>	H151		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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H151	Continued From page 1 #17 and #18). Severity: 2 Scope: 1	H151			
H152 SS=F	<p>449.782 Personnel Policies</p> <p>A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for:</p> <p>6. The maintenance of employee records which confirm that personnel policies are followed; This Regulation is not met as evidenced by: NRS 449.176</p> <p>1. Each applicant for a license to operate a facility for intermediate care, facility for skilled nursing or residential facility for groups shall submit to the central repository for Nevada records of criminal history two complete sets of fingerprints for submission to the Federal Bureau of Investigation for its report.</p> <p>2. The central repository for Nevada records of criminal history shall determine whether the applicant has been convicted of a crime listed in paragraph (a) of subsection 1 of NRS 449.188 and immediately inform the administrator of the facility, if any, and the health division of whether the applicant has been convicted of such a crime.</p> <p>NRS 449.179</p> <p>1. Except as otherwise provided in subsection 2, within 10 days after hiring an employee or entering into a contract with an independent contractor, the administrator of, or the person licensed to operate, an agency to provide nursing in the home a facility for intermediate care, a</p>	H152			

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H152	<p>Continued From page 2</p> <p>facility for skilled nursing or a residential facility for groups shall: (a) obtain a written statement from the employee or independent contractor stating whether he has been convicted of any crime listed in NRS 449.188; (b) Obtain an oral and written confirmation of the information contained in the written statement obtained pursuant to paragraph (a); (c) Obtain from the employee or independent contractor two sets of fingerprints and a written authorization to forward the fingerprints to the central repository for Nevada records of criminal history for submission to the Federal Bureau of Investigation for its report; and (d) Submit to the central repository for Nevada records of criminal history the fingerprints obtained pursuant to paragraph (c).</p> <p>2. The administrator of, or the person licensed to operate, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups is not required to obtain the information described in subsection 1 from an employee or independent contractor who provides proof that an investigation of his criminal history has been conducted by the central repository for Nevada records of criminal history with in the immediately preceding 6 months and the investigation did not indicate that the employee or independent contractor had been convicted of any crime set forth in NRS 449.188.</p> <p>3. The administrator of, or the person licensed to operate, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups shall ensure that the criminal history of each employee or independent contractor who works at the agency or facility is investigated at least every 5 years. The administrator of person shall:</p> <p>(a) If the agency or facility does not have the fingerprints of the employee or independent</p>	H152			

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H152	<p>Continued From page 3</p> <p>contractor on file, obtain two sets of fingerprints from the employee or independent contractor;</p> <p>(b) Obtain written authorization from the employee or independent contractor to forward the fingerprints on file or obtained pursuant to paragraph (a) to the central repository for Nevada records of criminal history for submission to the Federal Bureau of Investigation for its report; and</p> <p>(c) Submit the fingerprints to the central repository for Nevada records of criminal history.</p> <p>4. Upon receiving fingerprints submitted pursuant to this section, the central repository for Nevada records of criminal history shall determine whether the employee or independent contractor has been convicted of a crime listed in NRS 449.188 and immediately inform the health division and the administrator of, or the person licensed to operate, the agency or facility at which the person works whether the employee or independent contractor has been convicted of such a crime.</p> <p>5. The central repository for Nevada records of criminal history may impose a fee upon an agency or a facility that submits fingerprints pursuant to this section for the reasonable cost of the investigation. The agency or facility may recover from the employee or independent contractor not more than one-half of the fee imposed by the central repository. If the agency or facility requires the employee or independent contractor to pay for any part of the fee imposed by the central repository, it shall allow the employee or independent contractor to pay the amount through periodic payments.</p> <p>NRS 449.182 Each agency to provide nursing in the home, facility for intermediate care, facility for skilled nursing and residential facility for groups shall maintain accurate records of the information concerning its employees and independent</p>	H152			

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H152	<p>Continued From page 4</p> <p>contractors collected pursuant to NRS 449.179, and shall maintain a copy of the fingerprints submitted to the central repository for its report. These records must be made available for inspection by the health division at any reasonable time and copies thereof must be furnished to the health division upon request.</p> <p>NRS 449.185</p> <p>1. Upon receiving information from the central repository for Nevada records of criminal history pursuant to NRS 449.179, or evidence from any other source, that an employee or independent contractor of an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups has been convicted of a crime listed in paragraph (a) of subsection 1 of NRS 449.188, the administrator of, or the person licensed to operate, the agency or facility shall terminate the employment or contract of that person after allowing him time to correct the information as required pursuant to subsection 2.</p> <p>2. If the employee or independent contractor believes that the information provided by the central repository is incorrect, he may immediately inform the agency or facility. An agency or facility that is so informed shall give the employee or independent contractor a reasonable amount of time of not less than 30 days to correct the information received from the central repository before terminating employment or contract of the person pursuant to subsection 1.</p> <p>3. An agency or facility that has complied with NRS 449.179 may not be held civilly or criminally liable based solely upon the ground that the agency or facility allowed an employee or independent contractor to work;</p> <p>(a) Before it received the information concerning the employee or independent contractor from the</p>	H152		

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H152	<p>Continued From page 5</p> <p>central repository; (b) During any period required pursuant to subsection 2 to allow the employee or independent contractor to correct that information; (c) Based on the information received from the central repository, if the information received from the central repository was inaccurate; or (d) Any combination thereof. An agency or facility may be held liable for any other conduct determined to be negligent or unlawful.</p> <p>NRS 449.188 1. In addition to the grounds listed in NRS 449.160, the health division may deny a license to operate a facility for intermediate care, facility for skilled nursing or residential facility for groups to an applicant or may suspend or revoke the license of a licensee to operate such a facility if: (a) The applicant or licensee has been convicted of: (1) Murder, voluntary manslaughter or mayhem; (2) Assault with intent to kill or to commit sexual assault or mayhem; (3) Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime; (4) Abuse or neglect of a child or contributory delinquency; (5) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS, within the past 7 years; (6) A violation of any provision of NRS 200.50955 or 200.5099; (7) Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within</p>	H152		

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H152	Continued From page 6 the preceding 7 years; or (8) Any other felony involving the use of a firearm or other deadly weapon, within the immediately preceding 7 years; or (b) The licensee has continued to employ a person who has been convicted of a crime listed in paragraph (a). 2. In addition to the grounds listed in NRS 449.160, the health division may deny a license to operate an agency to provide nursing in the home to an applicant or may suspend or revoke the license of a licensee to operate such an agency if the licensee has continued to employ a person who has been convicted of a crime listed in paragraph (a) of subsection 1. Based on employee file review, document review and interview with the Administrator, the agency failed to comply with its own policy and procedure and state regulations regarding background checks for 8 of 18 employees (#1, #5, #6, #10, #13, #14, #15, and #16). Severity: 2 Scope: 3	H152		
H153 SS=F	449.782 Personnel Policies A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for: 7. The annual testing of all employees who have contact with patients for tuberculosis pursuant to NAC 441A.375; and This Regulation is not met as evidenced by:	H153		

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H153	<p>Continued From page 7</p> <p>NAC 441A.375</p> <p>3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a:</p> <p>(a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and</p> <p>(b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination.</p> <p>If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.</p> <p>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest</p>	H153		

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H153	Continued From page 8 radiograph and medical evaluation for active tuberculosis. 6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200. 7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis. Based on employee file review, document review and interview with the Administrator, the agency failed to comply with its own policy and procedure and state regulations for 13 of 18 employees (#1, #2, #3, #4, #5, #7, #8, #10, #11, #12, #13, #15, and #16). Severity: 2 Scope: 3	H153		
H162 SS=F	449.785 Contracts for Home Health Services If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must: 8. Assure that personnel and services contracted for, meet the requirements specified in NAC	H162		

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H162	Continued From page 9 449.749 to 449.800, inclusive, for home health agency personnel and services, including licensure, personnel qualifications, medical examination, functions, supervision, orientation, inservice education and case conferences. This Regulation is not met as evidenced by: Based on document review and interview with the Administrator, the agency failed to include in the written service contract that contracted personnel and services would meet NAC 449.749 to 449.800. Severity: 2 Scope: 3	H162		
H163 SS=F	449.785 Contracts for Home Health Services If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must: 9. Provide for the acceptance of patients for home health service only by the primary home health agency. Patients may not be admitted for home health service by any person without an appropriate review of the case and acceptance of the patient by the agency. This Regulation is not met as evidenced by: Based on document review and interview with the Administrator, the agency's service contract failed to address that acceptance of patients for home health services would only be by the primary home health agency and patients would not be admitted without an appropriate review of the case. Severity: 2 Scope: 3	H163		

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H164	Continued From page 10	H164		
H164 SS=F	<p>449.785 Contracts for Home Health Services</p> <p>If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must:</p> <p>10. Assure that personnel and services contracted for will provide treatment to referred patients without regard to race, creed or national origin.</p> <p>This Regulation is not met as evidenced by: Based on document review and interview with the Administrator, the agency's service contract with personnel and services failed to address that treatment to patients would be provided without regard to race, creed or national origin.</p> <p>Severity: 2 Scope: 3</p>	H164		
H169 SS=D	<p>449.791 Duties of Personnel</p> <p>1. A registered nurse shall:</p> <p>(a) Provide nursing guidance and care to patients at home.</p> <p>(b) Evaluate the home for its suitability for the patient's care.</p> <p>(c) Teach the patient and those in the home who nurse him how his care is to be given.</p> <p>(d) Supervise and evaluate the patient's care on a continuing basis.</p> <p>(e) Provide necessary professional nursing care.</p> <p>This Regulation is not met as evidenced by: Based on clinical record review and agency policy review, the agency's skilled nurse failed to evaluate patient care on a continuing basis via not updating a medication profile for 1 of 10</p>	H169		

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H169	Continued From page 11 patients (Patient #10). 1. The agency admitted Patient #10 on 5/21/09, and a skilled nurse reviewed Patient #10's medications on 5/21/09. 2. On 5/27/09, a physician ordered three new medications: Nitrofurantoin, Simvastatin, and Cheratussin. 3. Patient #10's file lacked an updated medication profile on 6/16/09. 4. Under item 10 of the agency's medication profile policy C-700, "the medication profile shall be reviewed by a registered nurse every 60 days and updated whenever there is a change or discontinuation in medication." Severity: 2 Scope: 1	H169			
H180 SS=F	449.793 Evaluation by Governing Body 6. The governing body shall provide for a quarterly review of 10 percent of the records of patients who have received services during hte preceding 3 months in each services area. The members of the committee must include an administrative representative, a physician, a registered nurse and a clerk or librarian who keeps records. The clerk or librarian shall review the clinical records to ensure that they are complete, that all forms are properly filled out and that documentation complies with good medical practices. The committee shall determine whether the services have been provided to the patients in an adequate and appropriate manner by all levels of service. The committee shall record any deficiencies and make necessary	H180			

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H180	Continued From page 12 recommendations to the administrator. If the branch offices are small, two or more offices may establish one committee to review cases from each are. Each subunit agency must establish a committee to review cases within its area. Minutes of the committee's meetings must be documented and available for review. This Regulation is not met as evidenced by: Based on document review, agency policy review and interview with the Administrator, the agency's governing body failed to conduct a quarterly review of 10 percent of patient records who received services during the preceding 3 months in each service area. 1. The agency's policy and procedure only required a quarterly review of 5 percent. Severity: 2 Scope: 3	H180			
H195 SS=D	449.800 Medical Orders 2. Initial medical orders, renewals and changes of orders for skilled nursing and other therapeutic services submitted by telephone must be recorded before they are carried out All medical orders must bear the signature of the physician who initiated the order within 20 working days after receipt of the oral order. This Regulation is not met as evidenced by: Based on document review, agency policy review and interview with the Administrator, physicians' telephone orders were not signed by the ordering physicians within 20 working days for 2 of 10 patients (Patient #4 and #5). 1. The agency's policy and procedure failed to indicate the time frame requirement. The agency's policy and procedure stated, "The	H195			

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS4225HHA	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 06/16/2009
NAME OF PROVIDER OR SUPPLIER CORINTHIANS OF NEVADA HEALTH CARE INC			STREET ADDRESS, CITY, STATE, ZIP CODE 2001 S RAINBOW BLVD STE K LAS VEGAS, NV 89146		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
H195	Continued From page 13 orders may be initiated via telephone or in writing and must be countersigned by the physician in a timely manner." 2. Patient #4's plan of care, dated 4/20/09 to 6/18/09, lacked a physician's signature on 6/16/09. 3. A physician signed Patient #5's plan of care, dated 8/13/08 to 10/11/08, on 10/2/08. Severity: 2 Scope: 1	H195			
H197 SS=F	449.800 Medical Orders 5. The agency must have an established policy regarding the administration of injectable narcotics and other drugs subject to the drug abuse law. If the policy allows the administration of injectable narcotics and other dangerous drugs subject to drug abuse law, they must be prescribed according to state regulations. This Regulation is not met as evidenced by: Based on document review and interview with the Administrator, the agency lacked documented evidence of a policy and procedure specifically addressing the administration of injectable narcotics according to state law. Severity: 2 Scope: 3	H197			
H200 SS=E	449.800 Medical Orders 8. New orders are required when there is a change in orders, a change of physician or following hospitalization. This Regulation is not met as evidenced by: Based on clinical record review and agency policy review, the agency failed to obtain new orders for	H200			

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS4225HHA	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/16/2009
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H200	<p>Continued From page 14</p> <p>changes made to the plan of care for 3 of 10 patients sampled (Patient #1, #3, and #10).</p> <p>1. On 6/16/09, Patient #1's file lacked documented evidence of ordered weekly skilled nurse visits for two weeks in February 2009.</p> <p>2. On 6/16/09, Patient #3's file lacked documented evidence of an ordered weekly skilled nurse visit for the last week of January 2009. The next skilled nurse visit occurred on 2/5/09. The file lacked an order discontinuing the visits.</p> <p>3. On 6/16/09, Patient #4's file lacked documented evidence of ordered weekly skilled nurse visits after 5/14/09. The file lacked an order discontinuing the visits.</p> <p>4. According to the agency's clinical documentation policy C-680, item 5 indicated "documentation of services ordered on the plan of care will be completed the day service is rendered and incorporated into the clinical record within seven days after the care has been provided."</p> <p>Severity: 2 Scope: 2</p>	H200		

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